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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number US 18024 **DECLARATION FOR UTILITY OR** Tiziano Dall'Occo First Named Inventor et al. **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date August 27, 2001 Declaration □ Declaration OR Submitted after Initial Submitted Group Art Unit with Initial Filing (surcharge (37 CFR 1.16 (e)) Filing **Examiner Name** required) As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Process for the preparation of ethylene polymers the specification of which (Title of the Invention) is attached hereto was filed on (MM/DD/YYYY) 12/22/2000 as United States Application Number or PCT International Application Number PCT/EP00/131 2nd was amended on (MM/DD/YYYY) 05/28/2001(if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. **Certified Copy Attached?** Foreign Filing Date (MM/DD/YYYY) Prior Foreign Application Priority Country Not Claimed Number(s) YES NO (12/28/1999)99204566.6 EP 靣 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: . 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet

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PTO/SB/02B attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Additional inventors are being named on the

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DECLARATION —	- Utility or	Design P	atent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. **Parent Patent Number** U.S. Parent Application or PCT Parent **Parent Filing Date** Number (MM/DD/YYYY) (if applicable) PCT/EP00/13192 (12/22/2000)Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pater and Trademark Office connected therewith:

Customer Number Place Customer Number Bar Code OR
Registered practitioner(s) name/registration number listed below Label here Registration Registration Name Name Number Number 47,894 38<u>,96</u>9 William R. Reid Margaret S. Millikin 31.217 Joanne W. Patterson Cristina Reverzani Limited Recog. Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number OR X Correspondence address below or Bar Code Label William R. Reid Name Basell North America Inc. Address 912 Appleton Road Address Elkton MD 21921 City State ZIP 410-996-1783 410-996-1560 US Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Dall'Occo Tiziano Inventor's elio. 2001 5 Jul Date Signature ITXIT Ferrara Residence: City Citizenship Via E. Farolfi 3 **Post Office Address** Post Office Address 44100 Ferrara IT City Country

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supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Please type a plus sign (+) inside this box -> | valid OMB control number. **ADDITIONAL INVENTOR(S) DECLARATION** Supplemental Sheet Page 3 of 3 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Sumame 2-00 Ofelia **Fusco** blia tuxeo Inventor's 5 July 2001 Signature Date Ferrara IT TTXIT Residence: City Citizenship State Via Mulinetto 63 THE STATE OF THE S Post Office Address Post Office Address Ferrara 44100 IT City Country Name of Additional Joint Inventor, if any A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname 3-00 Ilya E. Nifant'ev Inventor's 2001 12 Jul Signature Date RUX Moscow RU RU Residence: City Bakinskikh komissarov, Str. 12/3, appt.60 **Post Office Address Post Office Address** Moscow 119899 RU State Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname 4-00 llya P. Laishevtsev Inventor's ulaus 12 Jul 2001 Signature Date RUX RU Moscow Rυ Residence: City appt.V-1255 Main Building, Moscow State University, Lenin's Hill **Post Office Address**

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